

Work Order ID 121696

Thursday, June 26, 2014 3:07:09 PM

121696

Page 1

Item ID: D4635-143 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Aft Ceiling Replacement Panel Assembly, LH
Start Date: 7/18/14 Start Qty: 1.00 ***1*** Cust Item ID:
Required Date: 7/18/14 Req'd Qty: 1.00 ***1*** Customer:
Reference:

Approvals: Process Plan: MLJ Date: 14-06-30 Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D4635	E

100

0.00

100

HandThermo

Hand Finishing Thermoforming

Memo

Pick Kit

0.00

DAS
27
9-88

M/8/11

1

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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110

110

Small Fab

Small Fab

Memo

Assemble as per Dwg D4635-143

Bond foam core to inside of panel

3M Scotch Weld 1300 Batch: M29743

1- Scuff bonding surface to eliminate in-perfections and increase bonding and clean with wash& wipe

2- Locate and glue down Channel Assy, angles, brackets, and mounting pads using 3M Plastic welder II.(see note 8)

Batch # M129001

Expiry Date 1/30/15

3- Apply labels as per Dwg. and seal with 3M 3950 edge sealer(see note 9)

Batch: _____

0.00

0.00

0.00

0.00

DAS
16
9-89

DAS
38
9-89

120

120

QC

Quality Control

Memo

QC5- Inspect part completeness to step on W/O

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Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: _____	0.00							
130									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

MLJ 14-08-12

AA 14-8-12

DQA: _____ Date: _____



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Required Qty: 1.00

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4635-3		Manufactured	No			100	Each	0.0000	1	1			
<p>*D4635-3*</p> <p>Aft Ceiling Panel, LH</p> <p>D4669-1</p> <p>Manufactured</p> <p>No</p> <p>100</p> <p>Each</p> <p>38.0000</p> <p>1</p> <p>1</p> <p>DAS</p> <p>27</p> <p>9-89</p> <p>14/8/11</p>													
<p>*D4669-1*</p> <p>Bracket</p> <p>Location</p> <p>MF4</p> <p>117667</p> <p>Loc Qty</p> <p>38</p> <p>38</p> <p>Loc Code</p> <p>B120942</p> <p>1</p> <p>1</p> <p>DAS</p> <p>27</p> <p>9-89</p> <p>14/8/11</p>													
D4669-3		Manufactured	No			100	Each	24.0000	1	1			
<p>*D4669-3*</p> <p>Bracket</p> <p>Location</p> <p>MF4</p> <p>111991</p> <p>Loc Qty</p> <p>24</p> <p>24</p> <p>Loc Code</p> <p>B120942</p> <p>1</p> <p>1</p> <p>DAS</p> <p>27</p> <p>9-89</p> <p>14/8/11</p>													
D4695-3		Manufactured	No			100	Each	10.0000	1	1			
<p>*D4695-3*</p> <p>Channel</p> <p>Location</p> <p>MF1</p> <p>117672</p> <p>ST446</p> <p>119845</p> <p>Loc Qty</p> <p>4</p> <p>4</p> <p>6</p> <p>6</p> <p>Loc Code</p> <p>B121329</p> <p>1</p> <p>1</p> <p>DAS</p> <p>27</p> <p>9-89</p> <p>14/8/11</p>													

DQA: _____ Date: _____



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FAULT CATEGORY

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Picklist Print

Page 2

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Work Order ID: 121696

121696

Parent Item: D4635-143

D4635-143

Parent Item Name: Aft Ceiling Replacement Panel Assembly, LH

Start Date: 7/18/14

Required Date: 7/18/14

Start Qty: 1.00

Required Qty: 1.00

D4732-1

Manufactured No

100

Each

25.0000

1

1

D4732-1

Label

Location

Loc Qty

Loc Code

MF

20

120060

20

MF4

5

111243

4

93269

1

DAS

27

9-89

14/8/11

D4732-13

Manufactured No

100

Each

25.0000

1

1

D4732-13

Label

Location

Loc Qty

Loc Code

MF

20

120067

20

MF4

5

111245

4

93251

1

DAS

27

9-89

14/8/11

D4732-37

Manufactured No

100

Each

25.0000

1

1

D4732-37

Label

Location

Loc Qty

Loc Code

MF

20

120079

20

ST122

5

111264

5

DAS

27

9-89

14/8/11

Thursday, June 26, 2014 3:07:09 PM

Shop Packet Print

Page 2

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Parent Item: D4635-143

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Parent Item Name: Aft Ceiling Replacement Panel Assembly, LH

Start Date: 7/18/14

Required Date: 7/18/14

Start Qty: 1.00

Required Qty: 1.00

D5022-3

Manufactured No

100

Each

7.0000

1

1

D5022-3

Foam, Side Panel, Aft

Location

Loc Qty

Loc Code

M-F

7

114048

1

116251

6

B117SS7

DAS

27

8-89

14/8/14

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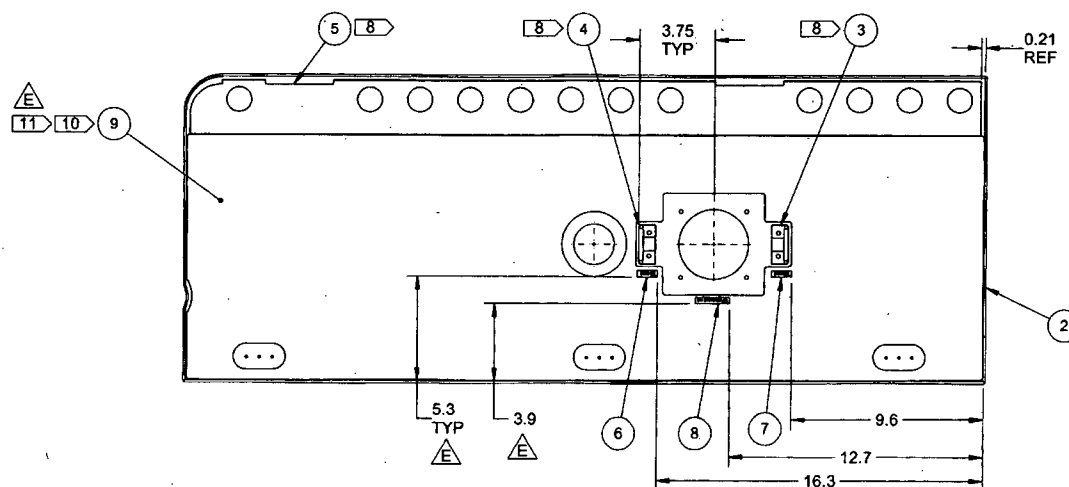
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Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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ITEM NO.	QTY. -143	PART NUMBER	DESCRIPTION
1	X	D4635-143	LH, AFT CEILING REPLACEMENT PANEL ASSY
2	1	D4635-3	LH, AFT CEILING PANEL
3	1	D4669-1	BRACKET
4	1	D4669-3	BRACKET
5	1	D4695-3	CHANNEL
6	1	D4732-1	LABEL
7	1	D4732-13	LABEL
8	1	D4732-37	LABEL
9	1	D5022-3	FOAM, SIDE PANEL, AFT, LH



D4635-143 LH, AFT CEILING REPLACEMENT PANEL ASSY

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) APPLY A BEAD (0.20 TO 0.30 WIDE) OF DEVCON PLASTIC WELDER II (0.25 INSIDE OF BOTH EDGES OF PART) TO BOND D4669-1/-3 & D4695-3. WAIT FOR 2 TO 4 HOURS FOR FUNCTIONAL CURE
- 9) LOCATE LABELS AS SHOWN, SEAL LABELS USING 3950 EDGE SEALER OVER LABEL TOP SURFACE
- 10) APPLY AN EVEN COAT OF 3M SCOTCH WELD 1300L CONTACT ADHESIVE TO BOND D5022-3 FOAM CORE TO INSIDE OF PANEL
- 11) CENTER D5022-3 FOAM ON D4635-3

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SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 121696 MLJ
14-06-30

RELEASED
2014-01-22

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	BC	DRAWING NO.	REV. E
MFG. APPR.	BC	D4635	SHEET 11 OF 18
APPROVED	BC	TITLE	SCALE
DE APPR.	BC	OUTBOARD CEILING PANELS	NTS
DATE	14.01.09	COPYRIGHT © 2012 BY DART AEROSPACE LTD	
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